



**ISD**  
**3**

# PLUMBING (PP) PERMIT APPLICATION

TO BE COMPLETED BY ALL PERSONS SEEKING A PERMIT FOR CONSTRUCTION WITHIN THE CITY LIMITS PURSUANT TO CHAPTERS 8 CODE OF ORDINANCES. (SEE INSTRUCTIONS ON BACK BEFORE COMPLETING)  
[www.burlingtonvt.gov/dpw](http://www.burlingtonvt.gov/dpw)

## IDENTIFICATION

Please Print or Type

JOB SITE LOCATION: STREET NUMBER AND STREET ADDRESS

PROPERTY OWNER NAME

PROPERTY OWNER'S ADDRESS (IF DIFFERENT FROM JOB SITE LOCATION)

## REQUIRED

**BUILDING PERMIT NUMBER** \_\_\_\_\_ (IF APPLICABLE, FOR THIS PROJECT)

PERMIT TYPE (CHECK ALL THAT APPLY)

☐ GENERAL PLUMBING ☐ OTHER \_\_\_\_\_

HAVE YOU OBTAINED A ZONING PERMIT (IF APPLICABLE)

☐ YES ( Please Attach Copy of Permit )  
☐ NO

## DESCRIPTION OF YOUR WORK

CONTRACTOR NAME (IF DIFFERENT FROM PROPERTY OWNER)

DATE CONSTRUCTION WORK WILL BEGIN

ESTIMATED COST OF PROJECT

CONTRACTOR ADDRESS (IF DIFFERENT FROM PROPERTY ADDRESS)

CITY/TOWN

STATE

ZIP CODE

CONTACT PERSON

TRADE LICENSE # (if applicable)

TELEPHONE #

**THE PERMITS ATTACHED TO THE APPLICATIONS MUST BE SIGNED AND PAID FOR WITHIN THREE BUSINESS DAYS OR THE PERMIT WILL BE PULLED AND CANCELLED.**

I further certify that this document has been examined by me, and is, to the best of my knowledge and belief, true, correct, and complete.

**DO NOT SEND PAYMENT WITH YOUR PERMIT APPLICATIONS**

SIGN HERE ►

\_\_\_\_\_  
Signature of Owner or Authorized Representative

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

ISD-1(08/09) After you complete this form, mail it to: Inspection Services Division, DPW, Box 849, Burlington, VT 05402-0849; or fax to: 863-0466

The purpose of Form ISD 1-5, Application for Permit, is to expedite your request for the permit(s) necessary for your project that are issued by the Department of Public Works. There is additional information regarding permits issued by other City departments. Please provide as much information as possible when filing out this form.

After completing this form, it will be forwarded to the inspector who will be reviewing the application, plans and processing the permit. The inspector will direct any questions to the contact person indicated on the form, and notify that individual when the permit has been issued and ready for pick-up. The pick-up area will be the DPW Customer Service desk where the applicant will be required to sign and pay the permit fees. **Please note: the permits must be signed and paid for with in three business days or the permit will be pulled and canceled.**

In the **IDENTIFICATION** section, enter:

**JOB SITE LOCATION:** This is the physical address when the permitted activity is occurring.

**PROPERTY OWNER NAME:** This is the name of the person or entity that actually owns the property located at the job site.

**PROPERTY OWNER ADDRESS:** The address of the property owner. If the property owner does not occupy the property located at the job site.

**PERMIT TYPE:** This is the type of permit you need for your project. Check the appropriate box; if you check "Other", please indicate the permit type in the blank provided.

**ZONING PERMIT:** A zoning permit is required when changes take place to the structure (including change of use) or lot coverage. Contact the Planning and Zoning Department at 865-7188 to obtain information on obtaining a zoning permit. Inspections by both the Planning and Zoning Department and the Public Works inspector are required to close out your project.

**DESCRIPTION OF WORK:** This is a description of the work you expect to perform at the job site.

**CONTRACTOR NAME AND ADDRESS:** The contractor may be you or another licensed professional. If you are self-contracting, leave this section blank.

**DATE CONSTRUCTION WORK WILL BEGIN:** Please indicate the date that you will be on the job and starting the work.

**ESTIMATED COST OF PROJECT:** Estimated cost of construction (ECC) shall mean total time and materials (T&M). Each trade (i.e., building, electrical, plumbing, heating, etc.) will have their own ECC and when combined adds up to the grand total cost of the project. When filling out your permit application for your specific trade, apply only the T&M amounts allocated to

complete that specific part of the project on that application. At the end of the project, all amendments (added cost made to complete the project) need to be captured and recorded by way of amending your original permit's ECC.

**CONTACT PERSON:** The contact person for the project is the person whom the inspectors will contact and the one who is identified in doing the job. The telephone number is one where that person can usually be reached during normal business hours.

**PERMIT FEES:** The permit fee is based on the estimated cost of the project at the rate of \$8.50 for every \$1,000.00 of construction cost, with a minimum permit fee of \$30.00, which includes a \$10 recording fee. An additional \$10 recording fee will be added when a Certificate of Occupancy is required. All fees are subject to change per Vermont State Statute, Title 32 Chapter 17 §1671.

**AFTER THE PERMIT IS ISSUED:** Once your plans have been reviewed, your permit processed, and secured by way of signature and payment made at the DPW Customer Service desk, your project may begin. The inspector will have checked off the appropriate boxes indicating the types of inspections required for that project. If you have any questions regarding the type and timing of these inspections, please contact the inspector. **Note: to avoid additional fees, fines, or legal action, do not start your project(s) without first securing your permit(s).**

**YELLOW PERMIT CARD:** The yellow permit card is required to be displayed so that it is in full view from the street at all times during construction. Depending on project scope, the back of the card may have a checklist for inspector site visits attached. It also provides the inspectors' telephone numbers.

Finally, in the space marked:

**SIGN HERE:** Sign your name, and enter your title and the date in the space provided. Drop off, send in or fax your completed form to:

INSPECTION SERVICES DIVISION  
DEPARTMENT of PUBLIC WORKS  
POST OFFICE BOX 849  
645 PINE STREET, SUITE A  
BURLINGTON, VT 05402-0849  
[www.burlingtonvt.gov/dpw](http://www.burlingtonvt.gov/dpw)

TELEPHONE (802) 863-9094  
FAX (802) 863-0466

**\*\*\*DO NOT SEND ANY TYPE OF PAYMENT WITH THE PERMIT APPLICATION (S) AND USE ONLY ONE APPLICATION FOR EACH TRADE.\*\*\***

Revised 8/10/12